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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Bloom, Stephen, , ,							
	(b) Address (number and street) 2100 Longs Gap Road	☐ Check if address changed			Candidate's FEC Identification Number     H8PA11061			
	(c) City, State, and ZIP Code						ew	Amended
	Carlisle		PA	17013		Statement X (N	l) OR	(A)
4.	Party Affiliation	5. Office Sought		6.	State & Distr	ict of Candidate		
	REPUBLICAN PARTY	House			PA	11		
	DE	SIGNATION OF	PRINCI	PAL C	AMPAIGN	COMMITTEE		
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election) election(s).							
	NOTE: This designation should be	iled with the appropria	te office liste	ed in the i	nstructions.			
	(a) Name of Committee (in full)  BLOOM FOR CONG	GRESS						
	BEGOWN ON GOIN	SILLOO						
	(b) Address (number and street) 2100 LONGS GAP ROAD							
	(c) City, State, and ZIP Code							
	CARLISLE				PA	17013		
	DE	CIONATION OF	OTLIED	A 1 1 T 1 1	0017ED /			
	DE	SIGNATION OF (Includin	_	_	epresentative			
8.	I hereby authorize the following nar candidacy.	ned committee, which	is NOT my p	orincipal c	ampaign com	mittee, to receive and ex	pend funds on beh	nalf of my
	NOTE: This designation should be to	iled with the principal o	campaign co	mmittee.				
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(b) Address (number and street)							
	( ) 0': 0: 1 710 0 1							
	(c) City, State, and ZIP Code							
	I certify that I have exa	mined this Statement	and to the b	est of my	knowledge ar	nd belief it is true, correct	and complete.	
e:	·					1	,	
	gnature of Candidate					Date	·	
	·				ically Filed]	1	<u>'</u>	
Bl	gnature of Candidate			[Electron	ically Filed]	Date 08/10/2017		37g.
Bl	gnature of Candidate oom, Stephen, , ,			[Electron	ically Filed]	Date 08/10/2017		37g.
Bl	gnature of Candidate oom, Stephen, , ,			[Electron	ically Filed]	Date 08/10/2017		37g.

FEC FORM 2 (REV. 02/2009)